SUBJ	ECT: (Optional) Office of for MAY	Security S 1969	tatistic	cal Rep	ort
FROM				EXTENSION	NO.
	SA/EPD Rm. 4E-38			6840	DATE
TO: buildi	(Officer designation, room number, and	DATE	ORWARDED	OFFICER'S INITIALS	COMMENTS (Number each comment to show from whom to whom. Draw a line across column after each comment.)
1.	C/EPD	6	/19/69	O	
2.		10 111	/ 	b.T	Y) V
3.	AC/Executive Staff	19 JUN	1969	17/	To 2: For Signature
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